

TOWN OF DAVIE

TOWN COUNCIL AGENDA REPORT

TO: Mayor and Councilmembers

FROM/PHONE: John A. George (954-693-8320)
Prepared by Angela Rodgers

SUBJECT: Resolution

TITLE OF AGENDA ITEM: A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, APPROVING THE EXPENDITURE OF LAW ENFORCEMENT TRUST FUNDS NOT TO EXCEED \$14,000.00 FOR THE PURCHASE OF DIGITAL RECORDERS AND TRANSCRIPTION SOFTWARE TO ENHANCE TECHNOLOGY IN THE CRIMINAL INVESTIGATIONS UNIT OF THE TOWN OF DAVIE POLICE DEPARTMENT.

REPORT IN BRIEF: The Town of Davie Police Department researched recording devices to enhance recording and transcribing technology in the Criminal Investigations Unit. An informal bid was conducted for the purchase of said digital recorder and transcription software. The Town solicited informal bids from competitive companies. The recommendation is to award to the lowest bidder, NovuScript for the purchase of both the digital recorders and the coordinating transcription software for Davie Police Department. The bid amount of the equipment is \$12,337.00 and the Police Department is requesting that the Town Council authorize up to \$14,000.00 to cover fees associated with shipping, handling and/or set up charges.

PREVIOUS ACTIONS: N/A

CONCURRENCES: N/A

FISCAL IMPACT:

Has request been budgeted?	No. Law Enforcement Trust Funds will be utilized.
If yes, expected cost:	\$12,337.00 plus shipping costs
Account Name:	Law Enforcement Trust Funds Account 001-0520-521-0317

RECOMMENDATION(S): Motion to approve Resolution

Attachment(s): Resolution
Informal Bid
NovuScript Quote
Bidder/Vendor Disclosure Form/W-9

RESOLUTION NO. _____

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, APPROVING THE EXPENDITURE OF LAW ENFORCEMENT TRUST FUNDS NOT TO EXCEED \$14,000.00 FOR THE PURCHASE OF DIGITAL RECORDERS AND TRANSCRIPTION SOFTWARE TO ENHANCE TECHNOLOGY IN THE CRIMINAL INVESTIGATIONS UNIT OF THE TOWN OF DAVIE POLICE DEPARTMENT.

WHEREAS, the Town of Davie Police Department is in need digital recorders and coordinating transcription software to enhance the technology in the Criminal Investigations Unit; and

WHEREAS, the Town solicited informal bids for the recording equipment; and

WHEREAS, after review, the Town Council wishes to accept the lowest bid from NovuScript; and

WHEREAS, the Town Council wishes to approve the expenditure of Law Enforcement Trust Funds not to exceed \$14,000.00.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA.

SECTION 1. The Town Council hereby accepts the bid from Novuscript for the purchase of digital recorders and transcription software in the amount of \$12,337.00.

SECTION 2. The Town Council hereby authorizes the purchase of the equipment and expenditure from Law Enforcement Trust Funds Account not to exceed \$14,000.00.

SECTION 3. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS _____ DAY OF _____, 2006

MAYOR/COUNCILMEMBER

ATTEST:

TOWN CLERK

APPROVED THIS _____ DAY OF _____, 2006

	A	B	C	D	E
1					
2			DIGITAL RECORDERS		
3					
4		NovusScript	Witkop	Office	HTH
5				Direct	Engineering
6					
7	Olympus DS 4000 Digital Recorder	\$11,560.00	\$12,400.00	\$12,760.00	\$13,960.00
8	Transcription Kit	\$777.00	\$597.00	\$897.00	\$807.00
9	TOTAL	\$12,337.00	\$12,997.00	\$13,657.00	\$14,767.00
10					

Police Administration Department
Digital Recorder / Transcription Kit
IB-06-144

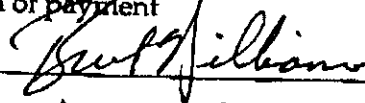
QTY	Description	Unit Price	Extended Price
40	Digital Recorder Manufacture: Olympus (or Equal) Model: DS-4000	\$ <u>289</u>	\$ <u>11,560</u>
3	Transcription Kit Manufacture: Olympus (or Equal) Model: AS-4000	\$ <u>259</u>	\$ <u>777</u>

Total Bid Amount

\$ 12,337

Our company does X does not _____ accept the Town of Davie VISA
credit card as a form of payment

Executed by (signature):

Print Name: BRET WILLIAMSTitle: OWNER

For (Corporation):

State: _____

Address: _____

Phone: 760.230.0384 866.408.1383Fax: 760.454.4221Date: 9.25.06Federal Employer Identification Number 20-3269340

YOU MUST RETURN:

1. This page
2. The W-9 Form
3. The Vendor/Bidder Disclosure Form

FROM :

FAX NO. : 9546933335

Oct. 19 2006 10:28AM P2

**Town of Davie
Vendor/Bidder Disclosure**

I, BRET WILLIAMS, being first duly sworn state that:

The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization:

DANIEL BRET WILLIAMS DRANOVUSCRIPT

Address:

7446 TRICOLACARLISLE, CA 92009

FEIN

20-3269340

State and date of incorporation

N/A**OWNERSHIP DISCLOSURE AFFIDAVIT**

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and addresses are as follows (Post Office addresses are not acceptable):

Names, Addresses, and Titles of Individual Who Will Lobby:

Full Legal Name	Address	Ownership
<u>N/A</u>		%
		%
		%
		%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name

Address

N/A

By:

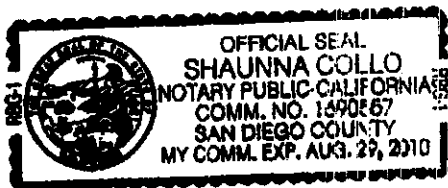


Signature of Affiant

Date: 19 Oct 2006BRET WILLIAMS

Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 19 day of October 2006, by Bret Williams, he/h~~e~~-is personally known to me or has presented CA Driver's Licence as identification.



Notary Public, State of Florida at Large

Shaunna Collo

Print or Stamp of Notary

Serial Number

My Commission Expires : Aug 29, 2010

Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See specific instructions on page 2

Name (as shown on your income tax return)
DANIEL BRET WILLIAMS

Business name, if different from above
Novu Script

Check appropriate box: ☒ Individual/
Sole proprietor ☐ Corporation ☐ Partnership ☐ Other ☐ Exempt from backup
withholding

Address (number, street, and apt. or suite no.)
7446 TRIGO LANE

City, state, and ZIP code
CARLSBAD CA 92009

List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3. Note: If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
| | + | | | | |

OR
Employer identification number
203269340

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign
Here

Signature of
U.S. person

[Signature]

Date **9.22.06**

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct for you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding.
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a partner if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 31.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity.